

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1357	Date: March 7, 2014
	Change Request 8465

NOTE: Transmittal 1353, dated February 26, 2014, is being rescinded and replaced by Transmittal 1357, dated March 7, 2014, to change the due date for Requirement 8465.6 to March 12, 2014, and add this date to the implementation date section. All other information remains the same.

SUBJECT: International Classification of Diseases, 10th Revision (ICD-10) Testing with Providers through the Common Edits and Enhancements Module (CEM) and Common Electronic Data Interchange (CEDI)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to instruct Medicare Administrative Contractors (MACs) to implement an official ICD-10 Testing Week with trading partners using the CEM and CEDI, and to solicit ideas on how else ICD-10 testing could be accomplished.

EFFECTIVE DATE: December 3, 2013

IMPLEMENTATION DATE: March 3, 2014; November 25, 2013 - for Requirement 8465.7; March 12, 2014 for Requirement 8465.6

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One-Time Notification

**Unless otherwise specified, the effective date is the date of service.*

Attachment - One-Time Notification

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I. GENERAL INFORMATION

A. Background: The Centers for Medicare and Medicaid Services (CMS) is in the process of implementing International Classification of Diseases, 10th Revision. All covered entities must be fully compliant on October 1, 2014.

The purpose of this Change Request (CR) is to instruct all MACs and the DME MAC Common Electronic Data Interchange (CEDI) contractor to implement an ICD-10 Testing Week with trading partners. The concept of trading partner testing was originally designed to validate the trading partners' ability to meet technical compliance and performance processing standards during the HIPAA 5010 implementation. The ICD-10 testing week has been created to generate awareness and interest, and to instill confidence in the provider community that CMS and the MACs are ready and prepared for the ICD-10 implementation.

This testing week will allow trading partners access to MACs and CEDI for testing with real-time help desk support. The event will be conducted virtually and will be posted on each MAC's and the CEDI Web site as well as CMS' Web site.

The testing week will be March 3 through March 7, 2014.

Additionally, contractors are asked to provide testing suggestions to CMS in writing by November 25, 2013.

B. Policy: Providers are required to submit ICD-10 codes on claims with Dates of Service 10/1/2014 or later. Contractors shall provide the opportunity for providers and suppliers to submit test claims through the CEM or CEDI on the designated testing days.

- Test claims with ICD-10 codes must be submitted with current dates of service (i.e. October 1, 2013 through March 3, 2014), since testing does not support future dated claims.
- Test claims will receive the 277CA or 999 acknowledgement as appropriate, to confirm that the claim was accepted or rejected in the system.
- Testing will not confirm claim payment or produce remittance advice.
- MACs and CEDI will be staffed to handle increased call volume during this week.

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Tammy Amendola, 410-786-1149 or Tammy.Amendola@cms.hhs.gov, Stacey Shagena, 410-786-8208 or Stacey.Shagena@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

VI. FUNDING

For Medicare Administrative Contractors (MACs):

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